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Bib Data Sheet

CONFIRMATION NO. 2738

SERIAL NUMBER 10/811,629	FILING DATE 03/29/2004 RULE	CLASS 702	GROUP ART UNIT 2857	ATTORNEY DOCKET NO. 003797.00864
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APPLICANTS

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** CONTINUING DATA ***** None, Mc

** FOREIGN APPLICATIONS ***** None, Mc

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/07/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 8	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 4
Verified and Acknowledged	Examiner's Signature: <u>Mohamed Shaw</u> Initials: <u>Mc</u>				

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TITLE

Scalability test and analysis

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)

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☐ 1.18 Fees (Issue)☐ Other _____☐ Credit